Attorney's Docket No.: 13751-019US1
Client's Ref. No.: A142 US

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and
joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is
sought on the invention entitled <u>FLP-MEDIATED RECOMBINATION</u> , the specification of which:

sought on th	e invention entitled <u>FLP</u>	-MEDIA LE	DRECOMBINAL	ion, me spe	cification of which	•
Π	is attached hereto.					
[X]	was filed on April	13, 2006	as Application S	Serial No	10/575,696	and was
	amended on				D COM T T T T T T T T T T T T T T T T T T T	
[X]						368 filed on
	October 14, 2004 an	d as amende	d under PC1 Artici	e 19 011	•	
I he	ereby state that I have re-	viewed and	understand the cont	ents of the al	ove-identified spe	cification,
	e claims, as amended by				•	
•		P. 1	. C 1 1	. 1	l en maeneabilier in	
	cknowledge the duty to d de of Federal Regulation		niormation i know t	o be materia	i to patentability in	accordance with
Title 37, Co	de of rederal Regulation	13, 81.50.				
	ereby claim the benefit u	nder Title 3	5, United States Co	de, §119(e)(l) of any United St	ates provisional
application(s) listed below:					
	U.S. Serial No.		Filing Date		Status	
60/5	511,610	Octo	ber 14, 2003		Expired	
I he	ereby appoint the follow	ing attorney	s and/or agents to pr	osecute this	application and to	transact all
	the Patent and Trademar			¢.		
Ali	Attorneys and Agents a	ssociated wi	th			
			0/1/0			

26168 PTO Customer Number

Direct all telephone calls to JACK BRENNAN at telephone number (212) 765-5070.

Direct all correspondence to the following:

26161 PTO Customer Number

For Assigned Inventions: I understand that the purpose of making this appointment is to permit prosecution of patent applications for the above-identified invention for the benefit of my assignee, and that this appointment does not create a personal attorney-client relationship between me and these appointees.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor:	HOLLY PRENTICE		
Inventor's Signature:	2)oly frent		Date: 300±06
Residence Address:	Carlisle, Massachusetts		
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Post Office Address:	35 Nathan Lane		
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		تد	
Full Name of Inventor:	LOUISA CAAMANO		
Inventor's Signature:			Date:
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Citizenship:	United States of America		
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Full Name of Inventor:	HOLLY PRENTICE		
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